24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (S

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00075820
Check if 24-hour report X 48-hour report New report Amends report file	ed on Mam / Dab / Yayayay
Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 16504	Amount
City State Zip Code ALEXANDRIA VA 22302	55004.26 Transaction ID : SE24-0.041769 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA Category/ Type	08 / 15 / Y 2014
Name of Federal Candidate Support Offi JOHN BARROW Oppose	ice Sought: House District: 12 President Senate State: GA
	bursement For: Primary X General
Full Name of Payee NATIONAL MEDIA RESEARCH PLANNING & PLACEMENT LLC	Date of Public Distribution/Dissemination
Mailing Address 815 SLATERS LANE	08 15 2014 Amount
City State Zip Code ALEXANDRIA VA 22314	Transaction ID : SE24-0.041768 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA Category/ Type	08 / 15 / Y 2014
Name of Federal Candidate Support Off JOHN BARROW Oppose	resident Senate State: GA
Calendar Year-To-Date Per Election for Office Sought Dis 242743.59	sbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	190208.70
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	190208.70
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Keith A. Davis [Electronically Filed] Date	08 15 2014